

SOCIAL SECURITY NUMBER

-I

PAYMENT DUE ON

JULY 31, 2012

#

2

NAME AND ADDRESS:

Rev. 10/12/11

VOUCHER 2 - (CALENDAR YEAR - DUE JULY 31)

- | | | |
|--|---|----------|
| 1. Amount of this installment..... | → | \$ _____ |
| 2. Amount of unused overpayment credit, if any, applied to this installment..... | → | \$ _____ |
| 3. Amount of this installment payment (Line 1 less Line 2)..... | → | \$ _____ |

Make checks payable to: **CITY TREASURER**
 Mail to: **Columbus Income Tax Division**
PO Box 182158
Columbus, Ohio 43218-2158

Note: DO NOT SEND CASH THROUGH U.S. MAIL

This form may be electronically filed
 and paid at www.columbus-tax.net

SOCIAL SECURITY NUMBER

-I

PAYMENT DUE ON

OCTOBER 31, 2012

#

3

NAME AND ADDRESS:

Rev. 10/12/11

VOUCHER 3 - (CALENDAR YEAR - DUE OCTOBER 31)

- | | | |
|--|---|----------|
| 1. Amount of this installment..... | → | \$ _____ |
| 2. Amount of unused overpayment credit, if any, applied to this installment..... | → | \$ _____ |
| 3. Amount of this installment payment (Line 1 less Line 2)..... | → | \$ _____ |

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 Mail to: **Columbus Income Tax Division**
PO Box 182158
Columbus, Ohio 43218-2158

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SOCIAL SECURITY NUMBER

-I

PAYMENT DUE ON

JANUARY 31, 2013

#

4

NAME AND ADDRESS:

Rev. 10/12/11

VOUCHER 4 - (CALENDAR YEAR - DUE JANUARY 31, 2013)

- | | | |
|--|---|----------|
| 1. Amount of this installment..... | → | \$ _____ |
| 2. Amount of unused overpayment credit, if any, applied to this installment..... | → | \$ _____ |
| 3. Amount of this installment payment (Line 1 less Line 2)..... | → | \$ _____ |

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